

2020

ACOMPT E

INTERIM STANDARDS

FOR Orthopedic Manual Physical Therapy
Fellowship Programs

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INTRODUCTION

Fellowship programs build on physical therapists' foundational knowledge and facilitate the development of advanced practitioners with enhanced skills in a defined area of practice.

Orthopaedic Manual Therapy (OMPT) is a specialized area of physical therapy for the management of neuromusculoskeletal conditions, based on clinical reasoning, using highly specific treatment approaches including manual techniques and therapeutic exercises.

Fellowship training in OMPT is based on these principles under the mentorship of a Fellow of the American Academy of Orthopaedic Manual Physical Therapists (AAOMPT) and is based on the curriculum and competencies outlined in the 2019 AAOMPT Description of Advanced Specialty Practice (DASP).

Mentoring develops fellows-in-training who elevate the quality of patient care and enhance the profession. Programs focus on advancing skills and knowledge including educational techniques, advanced clinical reasoning, research methodology, clinical skills, and administrative practices. The comprehensive curriculum integrates these combined skills and knowledge specific to a defined area of practice that is consistent with the program's mission, goals, and outcomes.

STANDARD 1: MISSION, GOALS, AND OUTCOMES

It is recognized that within this framework, programs may place different emphasis on research, leadership, teaching, and clinical practice. It is expected that the program mission will reflect the program-specific goals for it and its graduates. A given fellowship programs' mission communicates the advancing education offered to increase a physical therapist's efficiency and improve outcomes. The mission identifies the program's defined area of practice and promotes excellence in the field of physical therapy education by graduating competent specialty practitioners. The mission guides the program's operations and future growth. The program's goals direct the efforts necessary for continued viability and to meet its mission. The program's outcomes identify the knowledge and competencies participants gain upon program completion. Key indicators demonstrate the achievement of the program's mission, goals, and outcomes.

STANDARD 1 KEY ELEMENTS: A fellowship program meets this standard through the effective implementation and consistent documentation of the following key elements:

- 1.1 The mission statement communicates the program's purpose and commitment to providing advanced education to physical therapists in a defined area of practice that results in enhanced patient care.
- 1.2 The program's mission statement aligns with the sponsoring organization's mission statement.
- 1.3 The program identifies goals that are reflective of the defined area of practice. The program goals support the achievement of the mission and communicate the ongoing efforts necessary to support continued sustainability.
- 1.4 The program develops outcomes that identify measurable behaviors reflective of the defined area of practice which describe the knowledge, skills, and affective behaviors participants gain upon completion of the program.
- 1.5 The program identifies key indicators, it uses to regularly monitor and measure the achievement of the program's mission, goals, and outcomes. Key indicators form the basis for evaluating participant performance and determining program effectiveness.

STANDARD 2: CURRICULUM DESIGN AND INSTRUCTION

Fellowship programs focus on the advancement of physical therapist knowledge and practice. The curriculum of an OMPT fellowship program should clearly articulate the philosophy, content, learning outcomes, assessment and evaluation of a program of study (IFOMPT Standards). Curriculum design emphasizes one-on-one mentoring and focuses the knowledge, skills, and affective behaviors the participant gains that enhance professional competence and improve patient outcomes. Curriculum development follows a structured, systematic process that ensures content validity in a defined area of practice. The curriculum allows the participant to achieve the program's outcomes by advancing professional competence and education in the scientific principles that underlie practice applications. The curriculum integrates a variety of educational methods that support the theoretical basis for advanced practice and assessments grounded in scientific inquiry and systematic application of clinical reasoning. The curriculum enhances the participant's knowledge, skills, and affective behaviors through the integration of didactic instruction, focused practice, and application of evidence-informed practice principles. The curriculum is focused on the learning outcomes that serve as a detailed guide towards standards of education and training acceptable to ACOMPT and IFOMPT. Learning outcomes are measurable statements of what a student is expected to know, understand and/or be able to demonstrate after completion of a process of learning. They cover theoretical, practical and clinical knowledge applied to neuromusculoskeletal dysfunction.

STANDARD 2 KEY ELEMENTS: A fellowship program meets this standard through the effective implementation and consistent documentation of the following key elements:

- 2.1 **Curriculum Development:** The program's comprehensive curriculum is developed from and addresses the most recent version of the Description of Advanced Specialty Practice (DASP)¹ and the ACOMPT curricular standards². All curriculum components complement each other to enhance the participant's learning. The organization of the program's curriculum ensures congruency between didactic and clinical components and provides a structure for the designation of types, lengths, and sequencing of learning experiences that ensures the achievement of the program's outcomes. Evaluation of a curriculum includes mapping the curriculum to the learning outcomes to inform theoretical and clinical learning outcomes.
- 2.1.1 **Student Learning Outcomes:** The program is designed to provide instruction in and assess participants on the following learning outcomes.

¹ October 1, 2018

² ACOMPT curricular standards are based on IFOMPT Learning Outcomes

Dimension 1: Demonstration of critical and evaluative evidence-informed practice

1. Retrieve, integrate and critically apply knowledge from the clinical, biomedical and behavioral sciences in order to draw inferences for OMPT practice, recognizing the limitations of incorporating evidence into practice
2. Critically evaluate the results of treatment accurately, and modify and progress treatment and management as required using outcome measures to evaluate the effectiveness of OMPT
3. Integrate and apply evidence-informed approaches in the presentation of health promotion and preventive care programs
4. Enhance and promote the rights of the patient to actively participate in the health care management taking into account the patient's wishes, goals, attitudes, beliefs and circumstances

Dimension 2: Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the specialty of OMPT

1. Critically apply knowledge of anatomy, physiology and biomechanics to enable evaluation of normal and abnormal function
2. Critically evaluate knowledge informing pathology, pathogenesis and pain mechanisms underlying mechanical dysfunction of the neuromusculoskeletal system
3. Integrate and apply knowledge of examination procedures and differential diagnosis in the assessment of neuromusculoskeletal dysfunction
4. Critically apply knowledge and advanced clinical reasoning skills to differentiate dysfunction of the neuromusculoskeletal system from non-mechanical dysfunction in other systems
5. Critically apply knowledge of indications, contraindications, precautions and effects to inform best practice in the management of neuromusculoskeletal dysfunction

Dimension 3: Demonstration of critical use of a comprehensive

knowledge base of the clinical sciences in the specialty of OMPT

1. Critically apply knowledge of the clinical sciences (clinical anatomy, physiology, biomechanics and epidemiology) to enable effective assessment of the nature and extent of patients' functional abilities, pain and multidimensional needs in relation to the ICF classification
2. Demonstrate appropriate selection of assessment techniques and tools through understanding of their diagnostic and evaluative qualities (including: reliability, validity, responsiveness and diagnostic accuracy)
3. Critically apply knowledge of effectiveness and risks to inform OMPT interventions and accurately predict prognosis with realistic outcomes
4. Integrate and apply knowledge of prognostic, risk and predictive factors of relevant health problems to OMPT management decisions to ensure the patient can make informed choices

Dimension 4: Demonstration of critical use of a comprehensive knowledge base of the behavioral sciences in the specialty of OMPT

1. Critically apply theory of behavior and behavior change to effective OMPT assessment and management
2. Work effectively within a biopsychosocial model of OMPT practice to inform assessment and management strategies
3. Critically evaluate, through sensitivity to behavior, the influence of the OMPT physical therapist's behavior on a patient's behavior and vice versa
4. Critically use data from outcome measures to evaluate the clinical behavioral aspects of a patient's presentation

Dimension 5: Demonstration of critical use of a comprehensive knowledge base of OMT

1. Retrieve, integrate and critically apply current knowledge of the theoretical basis and evidence base of OMPT to inform assessment of the neuromusculoskeletal system

2. Critically evaluate evidence based diagnostic tests and outcome measures to enable a clinical diagnosis and effective evaluation of OMPT management
3. Critically apply current evidence-informed theory and knowledge of safe and effective practice of OMPT in the assessment and patient-centered management of the neuromusculoskeletal system
4. Integrate, apply and evaluate principles of mobilization, manipulation, motor-learning, exercise physiology, ergonomic strategies, and other modalities as components of multimodal evidence-informed OMPT intervention, to optimize a patient's functional ability

Dimension 6: Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with neuromusculoskeletal dysfunctions

1. Use advanced clinical reasoning to integrate scientific evidence, clinical data and biopsychosocial factors related to the clinical context
2. Critically apply the hypothetical-deductive and pattern recognition clinical reasoning processes using the various categories of hypotheses used in OMPT, related to diagnosis, treatment and prognosis
3. Critically evaluate and effectively prioritize clinical data collection to ensure reliability and validity of data and quality of clinical reasoning processes
4. Integrate evidence-informed practice, reflective practice and metacognition into a collaborative reasoning/clinical decision-making process with the patient, caregivers and other health professionals to determine management goals, interventions and measurable outcomes

Dimension 7: Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with neuromusculoskeletal dysfunctions

1. Demonstrate empathetic, efficient and effective use of active listening skills, questioning strategies, interpersonal skills and other

verbal/non-verbal communication skills to obtain reliable and valid data from the patient, avoiding errors of communication to enable effective OMPT patient management

2. Demonstrate efficient and clear written communication, patient record keeping, evidence of informed consent for effective and safe OMPT patient management that meets medico-legal requirements
3. Effectively explain the assessment findings and clinical diagnosis to the patient to enable a collaborative, patient-centered discussion of their management options
4. Proficiently using an advanced skill, implement effective management plans by educating patients in appropriate therapeutic rehabilitation exercise programs, and the promotion of wellness and prevention through the education of patients, caregivers/care-givers, the public and healthcare professionals

Dimension 8: Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with neuromusculoskeletal dysfunctions

1. Critically select and use appropriate practical skills and outcome measures to enable collection of high-quality clinical data to inform effective clinical reasoning during patient assessment
2. Critically select and use as appropriate, a range of therapeutic OMPT interventions including patient education, mobilization, manipulation and exercise prescription with appropriate consideration of treatment timing, dosage parameters and progression of interventions
3. Apply all practical skills with precision, adapting them when required, to enable safe and effective practice
4. Critically apply a range of other interventions, as appropriate, to enhance patient rehabilitation (e.g. taping)

Dimension 9: Demonstration of a critical understanding and application of the process of research

1. Recognize the need for the development of further evidence in

OMPT practice and the role of research in advancing the body of knowledge in OMPT Physical Therapy

2. Critically evaluate common quantitative and qualitative research designs and methods
3. Generate an appropriate research question based on a critical evaluation of current research evidence relevant to OMPT practice and neuromusculoskeletal dysfunction
4. (Discretionary) Systematically address all ethical considerations associated with research involving human subjects
5. (Discretionary) Effectively execute a research project relevant to OMT practice and neuromusculoskeletal dysfunction, selecting appropriate data analysis procedures and disseminating the conclusions of the study

Dimension 10: Demonstration of clinical expertise and continued professional commitment to the development of OMPT practice

1. Utilize effective integration of in-depth knowledge, current best practice, patient-centered practice, and cognitive and meta-cognitive proficiency within OMPT clinical practice
2. Solve problems with accuracy, precision and lateral thinking within all aspects of clinical practice
3. Utilize sound clinical judgement, evaluating benefit and risk, when selecting OMPT assessment and treatment techniques appropriate to the patient's changing environment and presentation
4. Critically apply efficient, effective and safe OMPT intervention in patients with complex presentations (e.g. multiple interrelated or separate dysfunctions and/or co-morbidities)
5. Produce scholarly contributions to the body of OMPT knowledge, skills and measurement of outcomes

2.1.2 **Program Structure:** The didactic and clinical curriculum permits participants to gain experience with a diverse patient population and a range of complexity of patient populations as characterized by the DASP and the ACOMPTE curricular standards.

- 2.1.3 **Patient Outcomes:** The curriculum design provides the participant with the knowledge, skills, and affective behaviors to manage patient care in support of improved patient outcomes through the integration of didactic instruction, focused practice, and application of evidence-informed practice principles. The program effectively uses mentoring to guide the participant through developing patient care plans based on best practices.
- 2.1.4 **Educational Methods:** The program integrates a variety of educational methods to ensure the participant's advancing level of mastery. Educational methods are appropriate to each of the curriculum content areas and reflective of the program outcomes.
- 2.1.5 **Assessments:** The program implements assessments designed to evaluate the participant's performance based on established measures. The program's formative and summative methods evaluate the participant's mastery of curriculum content based on performance measures and feedback provided in a timely manner. A variety of assessments evaluate the participant's initial and advancing levels of knowledge, practice, application of evidence-informed practice principles, and competence as characterized in the DASP and the ACOMPTE curricular standards. At a minimum, one written examination and two live patient practical examinations are required throughout the program. Live patient practical examinations should consist of: 1. Spine/axial focus with one evaluation and two follow-ups preferred. 2. Peripheral/appendicular focus with one evaluation and two follow-ups preferred. 3. At least one techniques exam on a model or patient.
- 2.2 **Program Requirements:** The program demonstrates compliance with minimum requirements that provides physical therapists with learning experiences resulting in advanced professional competence and increased quality patient care.
- 2.2.1 **Program Length:** The program provides a systematic set of learning experiences that address the knowledge, skills, and affective behaviors the participant needs to achieve the program outcomes within a set period of time. Fellowship programs are completed in no fewer than ten (10) months and in no more than sixty (60) months.
- 2.2.2 **Fellowship Program Hours:** The program offers a comprehensive curriculum that meets minimum required hours within the program's area of practice. Fellowship programs require participants to complete a minimum of 1,000 total program hours including: 1. A minimum of 200 theoretical/cognitive hours in OMPT knowledge

areas, 2. Pre-clinical practical/lab instruction in OMPT assessment and treatment techniques (160 hours minimum – 100 hours spinal focus, 60 hours extremity focus, and 3. At least 450 practical/clinical practice hours inclusive of 150 hours of 1:1 mentoring throughout the program distributed over the course of theoretical and practical skills learning. The practical/clinical practice hours can consist of direct and indirect hours.

The participant is the primary patient/client care provider for 75 of the minimum 150 mentoring hours. Mentoring is with a Fellow of AAOMPT.

- At least 75 of the 150 mentoring hours must be in-person (1:1)
- The remaining mentoring hours may occur in-person or using synchronous or asynchronous methodologies.

- 2.3 **Program Delivery:** The program is conducted in settings or affiliated clinical sites where management and professional staff are committed to seeking excellence in education and patient care by demonstrating substantial compliance with professionally developed and nationally applied practice and operational standards while maintaining sufficient resources to achieve the mission, goals, and outcomes.
- 2.4 **Mentoring Focus:** The program emphasizes the professional benefit of advanced clinical education through mentoring. The curriculum offers the participant individualized guidance on emerging and current best practices, patient care, and evidence-informed practice in a defined area of practice. Mentors provide comprehensive oversight and consistent feedback throughout the length of the program focused on advancing the participant's knowledge and expertise in a defined area of practice.
- 2.5 **Completion:** The program verifies that the participant meets completion requirements. The program director awards a certificate of graduation to the participant who completes the program. The certificate is issued in accordance with the DASP and ACOMPTE Standards and signed by the program director and administrators of the sponsoring organization. A certificate is only issued once the participant completes all program requirements.

STANDARD 3: PROGRAM DELIVERY, DIRECTOR, AND FACULTY

Fellowship programs implement consistent procedures for adequately responding to patient and participant's needs. Admissions criteria allows for equitable evaluation of the participant's ability to be successful in the program and supports the program's mission, goals, and outcomes. A qualified and experienced program director provides effective administrative leadership of faculty and oversees the delivery of a quality curriculum. Adequate support services facilitate the participant's successful completion and achievement of program outcomes.

STANDARD 3 KEY ELEMENTS: A fellowship program meets this standard through the effective implementation and consistent documentation of the following key elements:

- 3.1 **Admissions Criteria:** The program publishes equitable admissions policies and verifies the participant is eligible to practice based on state requirements. The program implements consistent procedures for evaluating each prospective participant's ability to be successful in the program and achieve their educational goals.

Program participants possess at least one of the following additional qualifications for admission:

- American Board of Physical Therapy Specialties (ABPTS) specialist certification in the related area of specialty as defined within the DFP,
- Completion of an ABPTRFE-accredited residency in a related specialty area as defined within the DASP, and/or
- Demonstrable clinical skills within a particular specialty area.

- 3.1.2 **Program Contract/Agreement/Letter of Appointment:** The program ensures each participant signs a contract/agreement/letter of appointment prior to commencing the fellowship program. The contract/agreement/letter of appointment is in compliance with the ACOMPTE's Admissions Offer Disclosures Check List.

- 3.2 **Participant Orientation:** The program conducts orientation activities to familiarize the participant with the program requirements including the mission, goals, outcomes, administrative policies, ACOMPTE standards, designated learning experiences, and evaluation processes.

- 3.3 **Administrative Policies:** The program publishes equitable administrative

policies and implements consistent procedures designed to protect the participant and the program.

- 3.3.1 **Retention Policy:** The program implements appropriate retention policies and procedures including academic and clinical requirements the participant must fulfill to maintain active status through graduation.
- 3.3.2 **Remediation Policy:** The program implements appropriate remediation policies and procedures including criteria for program dismissal if remediation efforts are unsuccessful. The program establishes methods and timelines to identify and remedy unsatisfactory clinical or academic performance. The remediation policies are distributed to and acknowledged in writing by the participant. The program documents and implements any necessary adjustments to the participant's customized learning plans, including remedial action(s).
- 3.3.3 **Termination Policy:** The program implements appropriate termination policy and procedures including termination of the participant who becomes ineligible to practice due to loss of license or for identified clinical or academic reasons (e.g., consistent underperformance or inability to successfully remediate). The program establishes procedures and timelines for termination. The program identifies the employment status of the participant should program termination occur.
- 3.3.4 **Grievance Policy:** The program implements an equitable grievance policy including procedures for appeal that ensures due process for the participant, faculty, and staff. Additionally, the program publishes ACOMPTE's grievance policy that a participant can follow if issues are not resolved at the program level.
- 3.3.5 **Student Complaints:** The program maintains a record of student complaints
- 3.3.6 **Leave Policy:** The program establishes appropriate professional, family, and sick leave policies including how these leaves could impact the participant's ability to complete the program.
- 3.3.7 **Non-Discrimination/Privacy/Confidentiality Policies:** The program documents compliance with applicable federal, state, and local regulations including non-discrimination, privacy, and confidentiality policies.
- 3.3.8 **Malpractice Insurance:** The program ensures that the participant

maintains comprehensive malpractice coverage to cover all work conducted as part of the program which may or may not be provided through the sponsoring organization by the program.

- 3.3.9 **Participant Tracking:** The program maintains a record of current and past program participants.
- 3.4 **Program Director:** The program director possesses the qualifications and experience in operations, financial management, and leadership to administratively oversee all aspects of the program in support of the mission, goals, and outcomes. The program determines the role and responsibilities of the program director.
- 3.5 **Program Coordinator:** A program coordinator is appointed if a program director does not meet the following required qualifications and clinical experience in the program's defined area of practice. The program coordinator is responsible for overseeing the curriculum and ensuring it comprehensively incorporates the requirements in the DASP. The program coordinator is a licensed physical therapist who completed either 1) ABPTS board certification plus one year of clinical experience or an accredited fellowship within the defined area of practice plus one year of clinical experience; or 2) obtained a minimum of five years of clinical experience in the defined area of practice.
- 3.6 **Faculty:** Individuals qualified by education and experience constitute the program's faculty based on their roles and responsibilities. The program's faculty possess the academic background, professional experience, and ongoing professional development to ensure the delivery of quality fellowship education.
- 3.6.1 **Quantity:** The program employs a sufficient number of faculty who possess demonstrated expertise in the defined area of practice including the appropriate credentials to support the program's mission, goals, and outcomes. The program's adequate number of faculty allow for:
- Teaching, mentoring, administration, individual counseling, supervision, research throughout the program, and
 - Faculty activities that contribute to individual professional growth and development.
- 3.6.2 **Qualifications:** Collectively, program faculty have the qualifications

necessary to oversee and initiate the learning experiences of the fellowship program. Faculty qualifications include the following:

- Advanced clinical skills,
- Academic and experiential qualifications,
- Diversity of backgrounds appropriate to meet program goals,
- Expertise in fellowship curriculum development and design, and
- Expertise in program and participant evaluation.

Judgment about faculty competence in a curricular area for which a faculty is responsible is based on:

- Appropriate past and current involvement in specialist certification and/or advanced degree courses,
- Experience as a clinician or academician,
- Research experience, and
- Teaching experience.

The faculty includes at least one Fellow of the American Academy of Orthopaedic Manual Physical Therapists (FAAOMPT).

3.6.3 **Mentors Qualifications:** Mentors for fellowship programs are required to be physical therapists who either: 1) are FAAOMPTs, or 2) meet the qualifications outlined by individual educational programs.

3.6.4 **Professional Development:** The program provides ongoing professional development experiences for faculty to support their role(s) within the program. Faculty professional development experiences are designed to maintain and improve the effectiveness of the leadership and mentorship that results in program improvement.

STANDARD 4: PROGRAM COMMITMENT AND RESOURCES

Fellowship programs' facilities support excellence in practice and dedication to physical therapy services. The program and sponsoring organization comply with all accreditation and regulatory requirements including other nationally applicable laws and industry standards. The program maintains sufficient resources to achieve the mission, goals, and outcomes. The program retains sufficient quantity and quality of resources to enable the fellowship program to accomplish its goals. Sufficient resources include adequate patient population, faculty, participant support services, staff, finances, access to relevant publications, equipment, materials, and facilities.

STANDARD 4 KEY ELEMENTS: A fellowship program meets this standard through the effective implementation and consistent documentation of the following key elements:

- 4.1 **Patient Population:** The program's patient population is sufficient in number and variety to meet the mission, goals, and outcomes. The program provides sufficient mentored clinical practice experiences for the most common diagnoses or impairments for all body regions identified in the DASP. Other learning experiences (observation, patient rounds, surgical observations, etc.) provide sufficient exposure to less commonly encountered practice elements.
- 4.2 **Educational Resources:** The program provides the participant and faculty access to current publications and other relevant materials in appropriate media to support the curriculum.
- 4.3 **Support Services:** The program and sponsoring organization provides adequate support services that encourage and promote the participant's successful completion.
- 4.4 **Financial Resources:** The program maintains financial resources that are adequate to achieve the mission, goals, and outcomes and supports the academic integrity resulting in continued program sustainability.
 - 4.4.1 **Sponsoring Organization:** For the protection of the program participant, the sponsoring organization demonstrates its support of the program, in part, by providing sufficient funding resources to sustain the program.
- 4.5 **Facilities, Equipment and Materials:** The program maintains facilities, equipment and materials that are typical of those used in contemporary physical therapy practice that are in good working order and available when needed.
- 4.6 **Teach-Out Commitment:** The program and sponsoring organization

commits to teaching out participants who are currently enrolled if it is deemed necessary to discontinue offering the program.

STANDARD 5: ASSESSMENT, ACHIEVEMENT, SATISFACTION, AND EFFECTIVENESS

Fellowship programs conduct ongoing evaluation of the mission, goals, outcomes, faculty, curriculum, and participants in a commitment to continuous improvement. The program annually gathers data, monitors results, and analyzes information to determine the extent to which the mission, goals, and outcomes are achieved. The evaluation process is planned, organized, scheduled, and documented to ensure ongoing quality education in a defined area of practice. Participant performance is evaluated initially, on an ongoing basis, and at the conclusion of the program. Participant evaluation data are used to further focus learning and instruction and confirm achievement of the program outcomes. Data collected on the post-graduate performance of the participant is used to evaluate the program's effectiveness and inform curriculum revisions.

STANDARD 5 KEY ELEMENTS: A fellowship program meets this standard through the effective implementation and consistent documentation of the following key elements:

- 5.1 **Program Assessment:** The program implements a plan and collects data from key indicators, used to annually evaluate the achievement of its mission, goals, and outcomes.
- 5.2 **Participant Progress:** The program establishes a consistent process for tracking the participant's level of achievement of the program outcomes against identified benchmarks. Overall participant progress is assessed at regular intervals to ensure timely completion and appropriate progression of participant advancement.
- 5.3 **Program Director and Coordinator Evaluation:** The program establishes an annual process for evaluating the program director and coordinator (as applicable) including adequate administrative program oversight, evaluation of program participants, and appropriate allocation of resources against identified benchmarks based on responsibilities.
- 5.4 **Faculty Evaluation:** The program establishes an annual process for evaluating faculty which may include an assessment of teaching ability, professional activities, clinical expertise, mentoring, and adequate participant support. When determining faculty effectiveness, the program identifies benchmarks and gathers data from multiple sources. Mentor performance is evaluated through direct observations by the program director/coordinator. Annually, faculty receive feedback results for continuous improvement purposes.
- 5.5 **Participant Post-Completion Performance:** The program regularly collects information about the post-completion performance of the fellowship

graduate which is used for program evaluation and continuous improvement.

- 5.6 **Program Effectiveness:** The program annually uses comprehensive outcomes data to inform curriculum revisions. The data guides the program's continuous improvement efforts indicative of an ACOMPTE-accredited fellowship program and provides evidence supporting the continued achievement of the mission, goals, and outcomes.
- 5.7 **Outcomes Publication:** The program regularly publishes outcomes data that communicates program performance indicative of participant achievement.